

Criminal Case Cover Sheet**U.S. District Court - District of Massachusetts**

Place of Offense:	Category No. <u>II</u>	Investigating Agency <u>DOL-OIG</u>
City <u>Boston</u>	Related Case Information: <u>Bar10066 -</u>	
County <u>Suffolk</u>	Superseding Ind./ Inf.	Case No. _____
	Same Defendant _____	New Defendant _____
	Magistrate Judge Case Number <u>13-mj-7025-JCB</u>	(Boal)
	Search Warrant Case Number _____	_____
	R 20/R 40 from District of _____	_____

Defendant Information:

Defendant Name Carlos M. Cruz Diaz Juvenile: Yes No
 Is this person an attorney and/or a member of any state/federal bar: Yes No
 Alias Name _____
 Address (City & State) Medford, MA
 Birth date (Yr only): 1984 SSN (last4#): 6,313 Sex M Race: _____ Nationality: _____

Defense Counsel if known: Oscar Cruz, Esq. Address _____

Bar Number _____

U.S. Attorney Information:

AUSA Lori J. Holik Bar Number if applicable _____

Interpreter: Yes No List language and/or dialect: _____

Victims: Yes No If yes, are there multiple crime victims under 18 USC§3771(d)(2) Yes No

Matter to be SEALED: Yes No
 Warrant Requested Regular Process In Custody

Location Status:

Arrest Date 02/01/2013
 Already in Federal Custody as of _____ in _____.
 Already in State Custody at _____ Serving Sentence Awaiting Trial
 On Pretrial Release: Ordered by: Magistrate Judge Boal on 2/1/2013

Charging Document: Complaint Information Indictment
 Total # of Counts: Petty _____ Misdemeanor _____ Felony 5

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I hereby certify that the case numbers of any prior proceedings before a Magistrate Judge are accurately set forth above.

Date: 3-14-13 Signature of AUSA: Lori J. Holik

District Court Case Number (To be filled in by deputy clerk): _____**Name of Defendant** Carlos M. Cruz Diaz**U.S.C. Citations**

<u>Index Key/Code</u>	<u>Description of Offense Charged</u>	<u>Count Numbers</u>
Set 1 <u>18 USC 664</u>	<u>Theft from Employee Pension Fund</u>	<u>1-5</u>
Set 2 _____	_____	_____
Set 3 _____	_____	_____
Set 4 _____	_____	_____
Set 5 _____	_____	_____
Set 6 _____	_____	_____
Set 7 _____	_____	_____
Set 8 _____	_____	_____
Set 9 _____	_____	_____
Set 10 _____	_____	_____
Set 11 _____	_____	_____
Set 12 _____	_____	_____
Set 13 _____	_____	_____
Set 14 _____	_____	_____
Set 15 _____	_____	_____
ADDITIONAL INFORMATION: _____		
_____	_____	_____
_____	_____	_____
_____	_____	_____